# **Application Data Sheet**

#### **Application Information**

Application Type: Regular
Subject Matter: Utility
Suggested Group Art Unit: 1623

Title: 2', 3'-DIDEOXYNUCLEOSIDE ANALOGUES FOR THE

TREATMENT OR PREVENTION OF FLAVIVIRIDAE

**INFECTIONS** 

Attorney Docket Number: 60137.0017USU1

Request For Early Publication:

Request For Non-Publication:

No

Total Drawing Sheets:

5

Small Entity:

Yes

Licensed US Govt. Agency: No

Contract or Grant Numbers: N/A

Secrecy Order in Parent Appl.: No

#### **Applicant Information**

Applicant Authority Type: Inventor

Primary Citizenship Country: US

Status: Full Capacity

Given Name: RAYMOND

Middle Name:

Family Name: SCHINAZI

Name Suffix:

City of Residence: ATLANTA

State or Province of Residence: GA

Country of Residence: USA

Street of mailing address: 2881 PEACHTREE ROAD, UNIT 2204

City of mailing address: ATLANTA

State or Province of mailing address: GA

Country of mailing address: US

Postal or Zip Code of mailing address: 30305

### **Applicant Information**

Applicant Authority Type: Inventor

Primary Citizenship Country: US

Status: Full Capacity

Given Name: ROBERT

Middle Name:

Family Name: STRIKER

Name Suffix:

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State or Province of Residence: WI

Country of Residence: US

Street of mailing address: 222 KENDALL AVENUE

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City of mailing address: MADISON

State or Province of mailing address: WI
Country of mailing address: US

Postal or Zip Code of mailing address: 53706

**Applicant Information** 

Applicant Authority Type: Inventor

Primary Citizenship Country: US

Status: Full Capacity

Given Name: JUNXING

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Family Name: SHI

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City of Residence: DULUTH

State or Province of Residence: GA

Country of Residence: US

Street of mailing address: 3086 CANTER WAY

City of mailing address: DULUTH

State or Province of mailing address: GA
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Postal or Zip Code of mailing address: 30097

Correspondence Information

Correspondence Customer Number: 23552

Representative Information

Representative Customer Number:: 23552

# **Domestic Priority Information**

Application:	Continuation Type:	Parent	Parent Filing Date:
		Application:	
This application	Claims priority from	60/453715	August 1, 2002
	provisional application		

#### **Assignee Information**

Assignee Name: Pharmasset, Inc.

Street of mailing address: 303-A College Road East

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Country of mailing address: USA

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### **Assignee Information**

Assignee Name: Emory University

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# **Assignee Information**

Assignee Name: LELAND STANFORD JUNIOR UNIVERSITY

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